



STATE OF NEW HAMPSHIRE
DEPARTMENT OF AGRICULTURE, MARKETS & FOOD
DIVISION OF ANIMAL INDUSTRY
603-271-2404



Application for Animal Shelter Facility License

First Time Applicants Please Submit Proof of Non-profit Status

Applicants Must Provide Proof the Facility Conforms to Municipal Zoning Regulations

The undersigned hereby applies for a license as an animal shelter facility at the following described premises, in accordance with the provisions of RSA 437, for the period ending June 30, _____.

ANNUAL FEE: \$350.00 per each premise. (Fiscal Year July 1, _____ to June 30, _____.)
Any new animal shelter facility applying for a license after January 1, and before June 30 of the current fiscal year, the license fee shall be \$175.00.

Premises to be licensed: _____
Organization/Individual

_____ NH _____
Physical Address of Facility City or Town Zip

Telephone: _____ E-mail address: _____

Shelter hours: _____

Is shelter operated in the home? Yes _____ No _____ Proof of Zoning Provided? Yes _____ No _____

Is there a microchip reader available? Yes _____ No _____

List the Transporter(s) used: _____

At any time have you been convicted of animal welfare violations in any state? Yes _____ No _____

If yes, explain: _____

Submitted by: _____
Individual, Firm or Corporate Name

_____ Mailing Address City/Town State Zip

Signature of Owner or Authorized Agent: _____
(Please also print name if signature is illegible)

_____ Title Telephone (If different from above)

Make checks payable to: Treasurer, State of New Hampshire
License fee is non-refundable

Mail application and fee to: Division of Animal Industry
P. O. Box 2042
Concord, NH 03302-2042